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PETITION FOR	REXTENSION OF TIME UNDER 37	Docket Number (Optional)		
FY 2009			BOEHMER-0041	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 10/562,149			Filed December 23, 20	05
For NOVEL PYRROLODIHYDROISOQUINOLINES USEFUL IN THE TREATMENT OF CANCER				
Art Unit 1625		Examiner Rita J. Desai		
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This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		Fee	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$130	\$65	—
$\boxtimes$	Two months (37 CFR 1.17(a)(2))	\$490	\$245	245.00
	Three months (37 CFR 1.17(a)(3))	\$1110	\$555	
	Four months (37 CFR 1.17(a)(4))	\$1730	\$865	
	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	—
Applicant claims small entity status. See 37 CFR 1.27.  A check in the amount of the fee is enclosed.  Payment by credit card via EFS.  The Director has already been authorized to charge fees in this application to a Deposit Account.  The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-3402.  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  I am the □ applicant/inventor. □ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). □ attorney or agent. Registration Number 50,908. □ attorney or agent under 37 CFR 1.34.  Registration number if acting under 37 CFR 1.34. □ Registration number 1 acting under 37 CFR 1.34. □ Registration number 1 acting under 37 CFR 1.34. □ .				
/Csa	aba Henter/	y 19, 2010		
Signature		Date		
			03) 243-6333	
Typed or printed name Telephone Number  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one sonature is required, see below.				
Total of forms are submitted.				